

PART B - FEE(S) TRANSMITTAL

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Mail Stop ISSUE FEE
Commissioner for Patents
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OCT 11 2005

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed when appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address indicated unless corrected below or indicated otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" maintenance fee notifications.

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10/13/2005 CCHAU2 00000014 131717 09634706

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/634,706	08/07/2000	Marcel DeGrandpre	99293-US	3849

TITLE OF INVENTION: INVERSE MULTIPLEXER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	10/21/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
RYMAN, DANIEL J	2665	370-536000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **MARKS & CLERK**2 **Richard J. Mitchell**

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Zarlink Semiconductor Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

400 March Road
Kanata, ON K2K 3H4
CANADA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number 13-1717 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

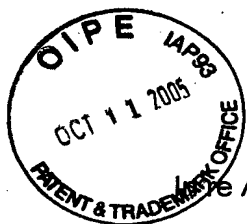
Date **October 5, 2005**

Typed or printed name

Richard J. MitchellRegistration No. **34,519**

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 14 Alexandria, Virginia 22313-1450.

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MAIL STOP ISSUE FEE

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Agent's Docket No. 99293-US

Application of)

Allowed: **July 21, 2005**

DeGrandpre, Marcel et al.)

Confirmation No.: **3849**

Serial No: **09/634,706**)

Art Unit: **2665**

Filed: **August 7, 2000**)

Examiner: **RYMAN, Daniel J.**

For: **INVERSE MULTIPLEXER**

October 5, 2005

Commissioner for Patents
U.S. Patent and Trademark Office
Randolph Building
401 Dulany Street
Alexandria, VA 22314
U.S.A.

TRANSMITTAL LETTER

Sir:

Submitted herewith are the following documents:

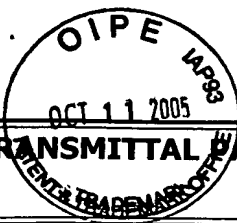
- Transmittal Payment of Issue Fee Form (in duplicate)
- Issue Fee Transmittal Form (in duplicate)

Respectfully submitted,

BY: 

Richard J. Mitchell
Reg. No. 34,519
Agent of Record

MARKS & CLERK
P. O. Box 957, Station B
Ottawa, Ontario Canada K1P 5S7 (613) 236-9561



TRANSMITTAL PAYMENT OF ISSUE FEE (Large Entity)
(37 C.F.R. 1.311)

Docket No.
99293-US

Applicant(s): Marcel DEGRANDPRE, et al.

Serial No.
09/634,706

Filing Date
August 7, 2000

Examiner.
RYMAN, Daniel J.

Group Art Unit
2665

Confirmation No.
3849

Invention:

INVERSE MULTIPLEXER

TO THE ASSISTANT COMMISSIONER FOR PATENTS
Washington, D.C. 20231
Attention: Box Issue Fee

Transmitted herewith are the following for the above-identified application.

☒ Issue Fee Transmittal Form PTOL-85

☒ Utility Fee: \$1,400.00 ☐ Design Fee: _____ ☐ Plant Fee: _____

☐ A check in the Amount of _____ is attached.

☒ The Assistant Commissioner is hereby authorized to charge and credit Deposit Account No. 13-1717 as described below. A duplicate copy of this sheet is enclosed.

- ☒ Charge the amount of \$1,400.00
- ☒ Credit any overpayment.
- ☒ Charge any additional fee required.


Signature

Dated: October 5, 2005

Richard J. Mitchell
34,519

I certify that this document and fee being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

Signature of Person Mailing Correspondence

Typed or Printed Name of Person Mailing Correspondence